Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

		Effe	ctive Octo	ber 1, 20)01 ———						4	
		CLAIMS A	AS FILED (Colum			umn 2)	SMAL TYPE		NTITY	OR		R THAN ENTITY
TOTAL CLAIMS			ŀ				RA ⁻	E	FEE	٦	RATE	FEE
FOR			NUMBER	R FILED	NUM	BER EXTRA	BASIC	FEE	370.00		BASIC FE	
T	OTAL CHARGE	ABLE CLAIMS	m	inus 20=	*		X\$:	9=		OR	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
IN	DEPENDENT (CLAIMS	п	ninus 3 =	*		X42)=		1	7/24	1
М	ULTIPLE DEPE	PRESENT		, = - · · · · · · · · · · · · · · · · · ·		` 			OR			
* 1	f the differenc	e in coiumn 1 is	less than a	rero enter	"O" in (column 2	+140			OR	+280=	
•						JOIUIIIII Z	TOT	٩L		OR	TOTAL	
·		CLAINS AS / (Column 1)	AMENDE	Colur		(Column 3)	SMA	LL E	ENTITY	OR		THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER OUSLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE	7	RATE	ADDI- TIONAL FEE
NOW	Total	* 22	Minus	** 20		-	X\$ 9	=		OR	X\$18=	36
AME	Independent	* 3	Minus	*** 3		=	X42:	_	<u>-</u>	OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		+140			1	+280=	
٠							TO			OR		2/
	(Column 1)			(O-1,	- · · · O\	(O-1, 0)	ADDIT. F			OR ,	TOTAL ADDIT. FEE	36
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	EST BER USLY	(Column 3) PRESENT EXTRA	RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9:	-		OR	X\$18=	
AME	Independent	*	Minus	***		=	X42=	1	· - · · · · · · · · · · · · · · · · · ·	OR	X84=	
	FIRST PRESE	ENTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		+140=	-		OR	+280=	
		· ·					TOT ADDIT, FI			OR A	TOTAL ADDIT. FEE	
•		(Column 1)		(Colum	n 2)	(Column 3)	ייייייייייייייייייייייייייייייייייייייי				IDDI į, PEEI	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI; TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	l .
	Independent	*	Minus	***		=	X42=	†		OR	X84=	
	PIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		+140=	十		ı	+280=	
* H	the entry in colu	nn 1 is less than th	e entry in colu	mn 2, write	0" in colu	ımn 3.	TOT/			OR L	TOTAL	
***	f the "Highest Nu	mb r Previously Pa mber Previously Pa ber Previously Pak	id For" IN THE	S SPACE is	less than	3, enter "3."	ADDIT. FE	E L			DDIT. FEE	



PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/382911

CEAING ACTION								SMALL EN		OTHER THAN OR SMALL ENTITY			
	_			(Column 1)		(Column 2)		•			<u> </u>	RATE	FEE
TOTAL CLAIMS				90		The state of the state of			RATE				710.00
FOR				NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR		710.00
TOTAL CHARGEABLE CLAIMS Ominus 2					s 20=	·Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS minus 3 =					* p			X40=		OR	X80=		
MUL	MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If 1	the	difference i	n column 1 is	less than zer	o, ente	er "0" in ce	olumn 2		TOTAL		OR	TOTAL	7/0
* If the difference in column 1 is less than zero, enter CLAIMS AS AMENDED - PART											OTHER		
		O.	(Column 1)		(Colu	ımn 2)	(Column 3)	_	SMALL		OR	SMALL	
NT A			CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	T	otal	AMENDINE	Minus	**		=		X\$ 9=		OR	X\$18=	
MEN		ndependent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							L	+135=		OR	+270=	
									TOTA		OR	TOTAL ADDIT. FEE	
1							(Column :	٥,	ADDIT. FE	Ē 	ADDIT. FEE		
 	(Column 1)				(Column 2) (C			3)		ADDI-	7		ADDI-
8			CLAIMS REMAINING AFTER		PRE	JMBER VIOUSLY AID FOR	PRESENT EXTRA	r 	RATE	TIONAL		RATE	TIONAL FEE
AMENDMENT B		Total	AMENDMEN	Minus	**		=		X\$ 9=		OR	X\$18=	
N N		Independent	•	Minus	***		=		X40=		OR	X80=	
5	{	FIRST PRES	ENTATION OF	MULTIPLE DEPENDENT CLA			4 🔲		105	1	1		
-									+135=		OR	TOTA	
1									TOTA ADDIT. FE		JOR	ADDIT. FE	E
		Medical Sta	(Column:	1)26		olumn 2)	(Column	3)	ietās.	<u> </u>			
	2	All Article of Maries	CLAIMS REMAININ AFTER AMENDME	G	N PR	IIGHEST IUMBER EVIOUSLY VAID FOR	PRESEN EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIQNAL FEE
	ME	Total	*	Minus	**		=		X\$ 9=	=	OF	X\$18=	=
	AMENDMEN	Independent		Minus	***		=		X40=		OF	X80=	
	₹ _	FIRST PRE	SENTATION O	F MULTIPLE D	EPEND	ENT CLAIM			+135:	_	OF	070	=
		If the orter in a	olumn 1 is less th	nan the entry in c	olumn 2.	write "0" in	column 3.		TOT	AL		TOT	AL
		If the "Highest	Number Previous	sly Paid For in i	HIS ST/	4CE 15 1655	ulait 20, office.	r "20.' "3."	" ADDIT. F	EE 		ADDITE	EE L
1	**	The "Highest I	Number Previou Number Previous	ly Paid For" (Tota	or Inde	pendent) is	the highest n	umbe	er found in the	appropriate	pox in	column 1.	